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| SERIAL NUMBER 10/717,395 | FILING DATE 11/19/2003 RULE | CLASS 607 | GROUP ART UNIT 3766 | ATTORNEY DOCKET NO. P-11110.00 |
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APPLICANTS

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** CONTINUING DATA ***** *1kai*
This appln claims benefit of 60/428,400 11/22/2002

** FOREIGN APPLICATIONS ***** *1kai*
NONE

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
** 02/18/2004

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|---|--|-------------------------|---------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged | <i>David Allen</i> Examiner's Signature | <i>1kai</i> Initials | STATE OR COUNTRY MN | SHEETS DRAWING 6 | TOTAL CLAIMS 27 | INDEPENDENT CLAIMS 4 |
|---|--|-------------------------|---------------------------|------------------------|-----------------------|----------------------------|

ADDRESS
27581
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710 MEDTRONIC PARK
MINNEAPOLIS, MN
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TITLE
Subcutaneous implantable cardioverter/defibrillator

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|------------------------------------|---|--|
| FILING FEE RECEIVED 1112 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
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